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Cholera in the Orient,

AND ITS

SUCCESSFUL TREATMENT

AND

Prophylaxis, in the Epidemic of 1865.

By Dr. CRICCA,

Smyrna,

Knight of the Imperial Order of Medjidee; Member of the Homœopathic Academies and Societies of Palerma, St. Louis (Missouri), Rio Janeirio, Paris, Brussels.

New Edition. Revised and Corrected.

Translated by John Davies, M.D., Chicago, Illinois.

CHICAGO:

C. S. HALSEY, 147 CLARK STREET,

Buffalo, 270 Main Street.

1868.

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CHOLERA IN THE ORIENT,

AND ITS

SUCCESSFUL TREATMENT,

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PROPHYLAXIS, IN THE EPIDEMIC OF 1865.

BY

DR. A. CRICCA,

SMYRNA,

KNIGHT OF THE IMPERIAL ORDER OF MEDJIDEE; MEMBER OF THE HOMŒOPATHIC ACADEMIES AND SOCIETIES OF PALERMA, ST. LOUIS (MISSOURI), RIO JANEIRO, PARIS, BRUSSELS.

NEW EDITION. REVISED AND CORRECTED.

(TRANSLATED BY JOHN DAVIES, M.D., CHICAGO, ILL.)

CHICAGO:

C. S. HALSEY, 147 CLARK STREET.

BUFFALO: 270 MAIN STREET.

1868.

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John Davies
Oct. 19, 1858

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C. S. HALSEY,

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In presenting, in our own language, this treatise, by one of the most distinguished physicians of Europe, I would not fail to express the obligations under which the profession are placed by so valuable a contribution from Dr. Cricca's pen.

I wish also to mention my own obligations to my friend, Rev. Dr. Patton, from whom I received the pamphlet in the French, as a memento of his travels in the East.

JOHN DAVIES, M.D.

Chicago, *April 10th*, 1868.

PREFACE

TO NEW EDITION.

"*The more we study details, the more certain we shall be of principles.*"—MONTESQUIEU.

IN publishing in this new edition, and collecting in one memoir the two pamphlets previously issued, we wish, first, to present an *ensemble* of conclusive facts, which serve to develop and confirm, by the weight of their own authority, the principles which we have previously laid down in the name of Homœopathic science.

The theory is proved by practice: this is the all important aim of our *brochure.*

We desire, in the second place, to offer, as *apropos* to this terrible malady, the memory of which still carries terror to the hearts of the people, a study which, though local in character, is not devoid of interest, even in a general point of view, at a moment when *savans*, assembled in international conference at Constantinople, are called to solve this important problem: "What are the prophylactics to be successfully employed in preserving humanity from the blows of this terrible scourge."

While wishing that so desirable a result may be obtained, we believe it our duty, in case the epidemic should reappear, to remind government physicians and the public, of the efficacious weapons provided by Homœopathy with which to combat the cholera.

SMYRNA, *April 1st*, 1866.

CHOLERA.

"*Salus populi suprema lex.*"

Our object in publishing this monograph is indicated by the above quotation. If we venture to speak upon a question of public interest, excited by the appearance of the Cholera in Egypt, it is not to make a noise merely about our medical creed, nor to call attention to ourselves personally.

Our sole aim is to render faithful, successful service to suffering humanity, by assisting to relieve the mind of, and to destroy or to combat, as far as may be in our power, that contagion as pernicious as an epidemic—*fear*.

To be well acquainted with an enemy, is half the victory in the conflict. Whether the Cholera is among us or not, it is not the less true that an epidemic, or, rather, panic, exists, which has spread rapidly, and of which that terrible scourge is the cause. If it has not furnished the pretext, it is certain that, owing to the echoing of the sad tidings, and to the prospect of the terrible invasion with which we are threatened, we find ourselves under the dominion of a not unwarrantable fear, which may to-morrow convert itself into a cruel reality.

We shall not discuss the question whether the existence of this malady is an undeniable fact; whether the several cases which are observed in our city present the peculiar symptoms to be met with in cases of Cholera.

We go still farther: we shall not seek to discuss the question whether the epidemic which is raging in Egypt is Cholera morbus; we accept the conclusion, amid contradictions more or less official, that it is indeed that cruel malady which is making ravages in Alexandria, which is thus knocking at our own doors, which has even signalized its presence in our midst, and to which some have already fallen victims. This being granted, we find ourselves engaged in a subject which interests the public health, which is, consequently, of great importance; and we therefore believe

ourselves sufficiently authorized to offer some advice, preceding it with the following observations, which, it is thought, will be found useful and necessary.

The *Cholera Asiatica*, so called because it comes from Asia, is a malady whose specific essence, or true pathological nature, is an enigma, which pathologists, as yet, have not been able to solve. It was born on the borders of the Ganges, and appears to have its home in the East, from whence it spreads from time to time, as far as our own land, traversing all the Oriental countries of Europe. It is then that it becomes *epidemic;* whereas, in the interval of these epochs, it manifests itself only in a sporadic manner: that is to say, only in isolated cases, especially in the months of July and August, and principally in the meridianal countries of Europe; but previous to this it is only sporadic.

Before the last great epidemic, which decimated Europe from 1829 to 1832, there was no very great attention paid to this disease, which, nevertheless, had always manifested itself here and there at different epochs, but without producing such fearful ravages as in its last invasion of our land.

The mode of its propagation, the inequality of its course and manifestations — also, the variety of the subjects it chooses for victims — constantly overturns all our theories of its nature.

Standing in the presence of this formidable foe to humanity, the physicians of the ancient school of medicine lacked neither a wide field, in which to try, apply, experiment, and vary their treatment; nor the means of knowing, studying, and estimating its results.

The record in this regard destroys all hope that may have been entertained in that direction. They were cruelly disappointed, and painful were the confessions drawn from the most courageous champions of official medicine.

It is, to-day, a manifest fact that the allopathic treatment of Cholera is supremely impotent.

It will be highly instructive to all to peruse Dr. Chargé's work on "Homœopathy and its Detractors," upon the occasion of the epidemic of Cholera at Marseilles; also, "The Treatment of Cholera," by Dr. Fabre, who enumerates the different methods employed in Cholera by the most celebrated allopathic physicians of all countries.

No less than from 1,500 to 1,800 methods suggested, not as curing the disease, but as a matter of experiment, each being in

opposition to the other. Each of these formulas contains, upon an average, no less than four different drugs, which makes a total of from 6,000 to 7,000 medicaments employed for the same disease.

This is not all. We find in the work of Dr. Fabre an account of all the barbarous procedures, invented and perfected by allopathic authorities, to torture and martyrize the poor patients — irritating *sinapisms* to envelop the patient from the head to the feet; *blood-letting of the temporal artery*, to force the blood when there is not sufficient to supply the demand made upon the circulation by reason of exhaustion; *extensive vesication of the stomach and back; cupping; moxas; beating the parts with nettles; venesection; leeching; counter-irritation; application of heat, of ice;* and all these with the expectation that some one of the many expedients will restore health to the sick?

Alas, no! The conscientious author of this work tells us frankly that, after having used every one of the remedies in the treatment of this disease, that his patients died in *two*, *twelve*, *fifteen*, *twenty-four* or *forty-eight hours*. These, and other declarations of Dr. Fabre, are confirmed by the experience of the most distinguished practitioners in the allopathic school.

"Amid the numberless methods of treating Cholera, it is unfortunate that not one possesses a constant efficacy."[1]

"During 1832, when the Cholera visited our people, the journals of medicine were filled with discussions, memoirs, and works upon the subject of this epidemic. In 1849, the physicians manifested no less zeal or lack of determination to search for the cause and the cure of Cholera; but, alas! their fallacies were abundant, their zeal useless — the Cholera still baffles their skill and drives to despair their theorists and therapeutists."[2]

It is superfluous to follow the author from whom we have made these extracts. They are evident truths, authoritatively supported by statistics.

From other authors we extract the following:

From a work published in 1843 at Leipsic, in which are stated the results of treatment by the most eminent allopathic practitioners. "In 459,536 cases of Cholera treated allopathically, 222,342 terminated fatally, which is about 52 per cent., deducting 42,056 as cases not reported accurately."

1 Compte rendu du traitement du choléra à l'hôpital Sainte-Eugénie service de M. Barthez. Revue de Thérap. Med. Chirug., Nov. 1er, 1854.

2 Abeille médicale. Revue clinique francaise et étrangère, 25 Juillet.

In another work, written in 1854, there is presented a report of 10,000 cases of Cholera in Lombardi-Venetia, by Dr. G. Fedrario — the same ratio of mortality is observed, the number of deaths being 5,385, or 54 per cent.

All of these authenticated statistics from allopathic sources establish the same results, sometimes increasing the rate of mortality as high as 70 per cent.

Official medicine, seeing these curative measures fail, hastened to counsel public and private hygiene, which are invaluable measures in themselves.

But these also did not avert the visitation of the epidemic, in its severest form, among the cities and villages of the East, where it has entered, like a midnight assassin into those places which, it was supposed, sanitary improvements had rendered invincible to any attacks from the pestilence.

Pending this era of death, the allopathic savans lost themselves amid a thousand conjectures about the nature of this disorder — varying, at pleasure, their numerous directions. The homœopathists, guided by the *ensemble* of morbid symptoms, without excitement, administered remedies indicated by the law of Similars, that simple and majestic law, which Hippocrates always quoted in the following formula, but never reduced to practice: "*Morbi* plerique his ipsis curantur a quibus etiam nascuntur."

They also recommended and commanded hygiene, but this measure alone is not sufficient.

We must here recall the remarks of the eminent Dr. Chargé.

"We too generally persist in observing strict rules of diet, as though in this lay the prophylactic. This is an error.

"Hygiene is the science of health. Without doubt it is an essential part of the science of organized living bodies, but it is, after all, only the study of the modifications that may enable us to impress upon health the particularities derived from the economy or system itself, or of the things which exercise an influence upon the health, without, however, going so far as to produce actual disease.

"Before all poisonous emanations, effluvias, virus — hygiene alone is useless. It is for therapeutics alone to combat them.

"Borrowing from therapeutics agents capable of antidoting a miasm before the system has felt its influence, or modifying in advance the organism itself, in order to render null the action of the malarial poison latent in the system, is what may be correctly

called making medicine preservative, and, thus considered, preservative medicine rests upon a basis as rational as curative medicine; it promises, moreover, results more favorable, and procured with less risk.

"But, let us inquire whether it is possible, during a season of epidemics, of whatever nature, to preserve one's self from its influence.

"Without hesitation, I maintain that this is possible.

"This pretension is not only true in theory, but has been confirmed by established facts.

"It is emphatically true that, in the epidemic of scarlet fever, *Belladonna* has preserved, almost without exception, all those children to whom a small dose of it was given at intervals, longer or shorter, according to the duration of the epidemic.

"All the classical works of the profession cite cases without number to show the preventative action of *Belladonna.* If their authors pass over the name of Hahnemann in silence, this is a blank which ignorance alone, more or less involuntary, refuses to fill, for it is to that immortal Therapeutist, and to him alone, that the credit of this valuable modern discovery is due.

"It has also been stated by the most competent authorities that *Quinine* cures the intermittent fever of the marshes, and, at the same time, insures immunity from a repetition of the attack."

We continue to extend the list: experience and observation demonstrate that

Rubeola has its antidote in *Pulsatilla;*
Miliara purpura — in *Aconite;*
Croup — in *Lycopodium* and *Phosphorus;*
Hooping cough — in *Pulsatilla;*
Small-pox — in *Vaccine.*

"If, then, *Quinine* and *Belladonna,*" says Dr. Chargé again, "obedient to the laws of analogy, have proved themselves efficacious in preventing attacks of marsh fevers and epidemic scarlatina, even under the empire of principles which engender these diseases, I ask, why refuse a privilege of the same nature, emanating from the same source, to those medicaments which are found to possess the same pathogenetic relations to Cholera that *Quinine* sustains to marsh fever, and that *Belladonna* sustains to scarlet fever."

It was all important to find the analysis of Cholera in drug provings. This difficulty overcome (and it is certain that Hahne-

mann has conquered it by his experiments), it can not be denied that among individuals submitted to the action of these modifiers of epidemic Cholera, the influence may be rendered powerless: as scarlet fever and intermittent fever are annihilated by *Belladonna* and *Quinine*. In fact, passing boldly from theory to practice, the homœopathists adopted this logical course, and set themselves to combat the epidemic prophylactic of the Hahnemannian school.

Espanet remarks ("*Etudes élémentaires d'homœopathie*"), that "there is not a homœopathist in all the wide world that does not possess the same convictions and the same weapons in these remedial agencies, when given in accordance with the law of Similia. Wonderful accord! admirable unity of conviction! sufficient alone to establish the truth and present its claims to every one."

It is no secret to any one, amidst the many prophylactics offered to the public, that the two principal specifics of our school, and incontestable preservatives against Cholera, are *Veratrum album* (White Hellebore), and *Cuprum*. These have proved, after numberless experiments, always successful, to be the best antidotes to attacks of Cholera, in its characteristic symptoms of coldness, cramps, and rice-water discharges. We never fail to obtain the desired results from the use of these remedies indicated by the homœopathicity of *Veratrum* and *Cuprum* to Cholera symptoms.

Dr. Jal, of St. Petersburg, penned the following remarkable observation upon the treatment of Cholera morbus by homœopathy in 1849. "Although I have an extensive practice, some may not be aware that I have treated successfully a great number of cases of Cholera. All my patients were furnished with preventatives. Nine-tenths were exempt from the disease; one-twentieth suffered from cramps, which were speedily alleviated by frictions of saturated camphor; five or six had symptoms of Cholerine; not one died."

Dr. Liuzzi, of Rome, one of the first physicians who introduced homœopathy into Italy, observes "that at the time of the great epidemic of 1837, not one of those who had recourse to preservatives were attacked by Cholera."

At Barcelona, in 1854, Dr. Sirarol states the same facts in regard to preservatives.

Also, Dr. Domenech — "Hundreds who have taken these preventatives were exempt from Cholera."

Dr. Saullechi adds that out of 3,000 persons who had taken the preventatives, only one was attacked.

At Valence: "In the whole practice of Profs. Pastor and Maten Garin, every one took these preservatives — one case of Cholera only."

Dr. Duross states: "In fourteen families who had taken these preservatives, but one was sick, and that was an infant two years old."

Dr. Pedro Martinez Mosegosa, of Murcie, in 1854, says: "Two hundred and thirteen persons used these remedies, and not one of the number was attacked with the disease."

Dr. Chargé, of Marseilles, observes that the prophylactics were admirable. "I have not had a case of Cholera in my practice. The House of Refuge at Marseilles, which, in 1849, gave me two hundred and fifty cases of Cholera, fifteen of which only died, has been preserved entirely, and this house contains about four hundred patients."

Drs. Mure, Gatti and Codde, at Gênes, in 1854, together with Dr. Monte, of Bologne, obtained the same results.

These numbers are eloquent, and we might multiply indefinitely these evidences from authentic sources — but it would be superfluous.

Our design being only to set forth the comparatively safe character assumed by the Cholera, when an individual exposed to the absorption of the malaria, protects himself from its influence by the preservatives indicated by homœopathy, we deem it unnecessary to give here a complete list of the mortality among the sick, who were treated homœopathically, and who had not made use of prophylactics.

The number of deaths have averaged from five to eight per cent., according to Dr. Jahr. The following citations support his statement:

In Prague, in 1832, Dr. Schuller treated homœopathically, one hundred and thirteen cases of Cholera, and never lost one patient.

In the same city, Dr. Lowry, who practiced more particularly in the lower part of the city, where the epidemic raged more fearfully, treated eighty cases: seventy-two recovered, and only eight died.

At Tischnovitz, Dr. Gerstel treated himself three hundred and thirty Cholera patients. Two hundred and ninety-eight recov-

ered, and thirty-two died. Five of the last number were over seventy years of age.

At Vienna, Dr. Marenzeller lost but three out of thirty. Dr. Loedner, student of P. Frank, after having lost his first fifteen cases in the first stages, decided to try homœopathy, and in eighty cases only two died, seventy-eight were convalescent. Dr. Schultz had seventeen Cholera patients, and all got cured.

The work from which we make these extracts is published by Dr. Roth, *Allopathic Professor of Pathology in the University of Munich, who was charged by the appointed Minister of the Interior of Bavaria, V. Wallerstein, with the examination in various places of the results of homœopathic treatment of the epidemic in* 1833.

"From a work already cited, we learn that according to the best statistics on the treatment of the epidemic, by the new method of practice, there were 14,004 cases; 12,748 were cured, 2,266 died, which is equal to 9 per cent. The same proportion of deaths occurred in the practice of homœopathic physicians in Brunn, Paris, Angers, Bordeaux, and Russia, etc.

Our conclusions are readily inferred from the above facts.

We hope to be able by our system of therapeutics, to prevent Cholera from being a fatal scourge.

To insure our escape from this calamity, we count upon vigorous measures, recommended by simple prudence, which those who administer the government will not fail to take; upon the assiduous care with which the sanitary physician will attend to all that concerns the public health; upon the hygienic means which all, rich and poor, would do well to adopt.

But if, contrary to our efforts and wishes, the Cholera breaks out again in our midst, we shall counsel recourse, without losing precious time, to the preservative measures, previously pointed out in this work, and of which we further add as follows:

RÉGIME AND PREVENTATIVE TREATMENT OF CHOLERA.

The Regime.—To observe this, is of the highest importance, in order to guard one's self against the possibility of infection, or, in other words, to avoid every thing which may increase the receptivity of the organism for this malady.

It is our duty to prepare for this disease by personal cleanliness, and personal attention to the cleanliness of our dwellings; also, as much as possible, to see to it that the air surrounding our places of business and residence is pure.

We should avoid putting several beds in the same room. Frequently in the day time we should open the windows of the sleeping apartments, to permit a change of air, and thus prevent the exhalations of the body remaining within to contaminate the apartments.

It is very essential to beware of too sudden changes of temperature — passing from heat to cold, and especially during the night. It is well to keep rather warm, and to wear garments which secure this end, and which are in conformity to the different seasons.

In addition to this we should avoid excesses of every kind, in eating, drinking, watching, working, or pleasure-seeking.

Exercises in the open air are preferable to remaining in-doors, because the atmosphere of houses, especially in populous districts, is much more dangerous, owing to its being more concentrated in confined apartments than when diffused through space.

A state of *ennui* and indolence should be entirely abandoned, as it predisposes the organism to non-resistance of external impressions. A moderate activity in a healthful business constitutes a diversion which is powerful to avert the fear and danger of Cholera.

Besides, it is imperatively demanded that we should continue the same habits of diet and general exercises, as in ordinary seasons of health, providing that they accord with the laws of temperance. As much as possible avoid being chilled. Abstain from eating melons, cucumbers, acid fruits, vinegar; and above all, the juice of the citron; green, bitter or aromatic herbs; old cheese and ices. Discontinue all kinds of food that you know from experience is difficult of digestion, and which are liable to produce symptoms analogous to Cholera. We advise the drinking of spiced, sweet and sugar water, flavored with rum or cognac. Those who can desist from drinking coffee will find that it will contribute much to their safety. Should the privation be too severe, less quantities of the luxurious beverage will be more opportune.

The use of tobacco and tea may be tolerated, especially if the habit be an old one, and as the system may feel the effects of

too sudden a change to discontinue these articles. It is better to diminish it by degrees.

It is necessary, further, to avoid cherishing violent moral impressions or emotions, strong passions, exciting amusements, anger, and particularly fear, dread of infection, secret grief, prolonged care, etc. As much as possible, then, during the presence of the Cholera in a locality, maintain a tranquil frame of mind, and never forget the valuable counsel given by Horace:

> "Æquam memento rebus in arduis,
> Servare mentem sicut in prosperis."

Prophylactics.—Those indicated by Hahnemann, in 1832, whose efficacy we have realized and confirmed by experience. Every two days, before eating, take two or three globules of *Veratrum alb.*, 12th potency, dry on the tongue before eating.

Alternate *Cuprum metallicum*, 12th, with the *Veratrum*, and take the same quantity in like manner.

The *tincture* of *Colocynth*, is a third valuable agent in the height of the epidemic, and especially for those who, by reason of extreme fear, are attacked by moral depression, spasms, tremblings, colics and diarrhœa.

One drop, or even several globules each day, according to the nature of the case.

Dr. Hering further recommends the use of *Sulphur* in low conditions of Cholera.

This is, perhaps, the place to specify the symptoms which characterize simple Cholera from those which distinguish sporadic Cholera from Cholera Asiatica, and to describe the treatment of the premonitory symptoms of the first stage of epidemic Cholera —then of the second and finally of the third; besides this, to point out the specific curatives which homœopathy furnishes to each of these periods, and finally indicate the powerful curative specifics which homœopathy possesses for all these cases, and of which *Veratrum* and *Cuprum* are not the least powerful. But in doing this we should compose a scientific work, and lengthen greatly this publication, and such is not our intention.

It must be borne in mind that it is of the first importance to give immediate attention to the very first symptoms of Cholera, since it is comfirmed that by the use of the homœopathic remedies indicated, the primary attacks are cured as by enchantment.

Therefore, to impress the memory with this caution, we present here a synopsis of the first symptoms:

Rapid sinking of all vital forces — general uneasiness — lassitude — general inclination to lie down — bewildered expression of the countenance — eyes sunken — melancholy, painful physiognomy — face pale and cold — pulse feeble — vertigo and ringing in the ears — inability to think — general or partial coldness — painful burning in the stomach and throat — extreme anguish and sensibility to touch at the pit of the stomach — cramps in the calves of the legs, and other muscular parts of the body — numbness of the fingers — irritability and despondency — often an absence of thirst — vomiting and diarrhœa, but very often also, evacuations, frequently accompanied with flatulent rumblings.

When an individual is attacked with the above named symptoms, which is the *first stage of Cholera*, he should, under these circumstances, remember that the *Camphor* of Hahnemann is the specific *par excellence.*

We shall indicate its use, in order that it may be taken by the patient himself, ere he can obtain the services of a physician. Proceed at once to envelop the patient in a woolen blanket, and place him in bed, then administer two or three drops of the pure spirits of *Camphor*, upon white sugar, or put five or ten drops in a spoonful of pure water, and give a teaspoonful of the solution every five or ten minutes, as long as the spasms, cramps, and coldness are persistent, and until a pleasant warmth is produced, with perspiration, which generally takes place after the fifth or sixth dose, under ordinary conditions.

There are some persons constitutionally skeptical, who will assume to smile sarcastically at what has been written in these pages, and who will appear indifferent to the facts recorded, but the public health is too valuable to be sacrificed at the shrine of medical bigotry.

The same old cry of charlatanism will be raised by those who interpret unfavorably our charitable efforts to do good, and who assert that our sole object is to serve our own interest.

These exceptions we anticipate, and shall consider such compliments as favorable to ourselves.

We expected these comments, and provided for them. All of us are at liberty to follow our counsel, based on experience,

or to pass them by on expressing thoughts and convictions conscientiously, in accordance with moral obligations.

Should we snatch from the scourge but one victim, we should be repaid for our toil and care.

Permit us, before closing this part of our advice, to recall the words of the celebrated Broussais to sustain our statement, "that there is nothing so forcible and conclusive as a fact."

In 1860, when the violent epidemic of scarlet fever attacked the families of Smyrna, many ridiculed the idea that *Belladonna*, in small doses, was a prophylactic against Scarlatina, notwithstanding we recommended it to all, friends and foes to the practice of Homœopathy, and distributed it indiscriminately, gratis, to all who asked for it, and administered it successfully in our practice to about three hundred children.

Those who disbelieve the truth of what I stated, employed the opposite school of practice, and counted their victims by thousands, whilst those put under the influence of this prophylactic, were preserved from this epidemic.

Smyrna, July 5, 1865.

RÉSUMÉ — AFTER THE CHOLERA.

Contrary to general expectation, and our published views in pamphlet form of July fifth, the epidemic has come down upon our city like a furious avenger, implacable and sudden, without pity, without intermission, and without favor.

Timid and uncertain in the beginning, the Cholera commenced its first onslaught on the 24th of June.

Brought from Alexandria by the Egyptian steamers, on board of which were crowded numerous passengers flying from the malady which had first broken out there, and pilgrims returning from Mecca, it signalized its presence in our Lazaretto, after which it broke out in our city under the following circumstances:

A Turkish dwelling, set in defiance of the regulations, against the walls of this Lazaretto, contained a family who received a traveler who was attacked with Cholera, and died on the 20th June; his linen was washed by a Greek washerwoman living near at hand, and she fell a victim to the same disease, on the 24th June.

Observe that the Lazaretto is located, by reason of numerous structures recently raised, in the midst of habitations which extend from Smyrna along the shore of the gulf, almost without interruption to the village of Gueuz-Tépé. It is not, therefore, separated, as it should be, from every other building, nor is it what the people desire to have. In the meantime the Governor has earnestly petitioned the Sublime Porte for the construction of a new Lazaretto in a distant part of the city.

The period of the first few days, from the 24th of June to the 11th of July, presented a sort of vagueness in the statement of the cases in the nature of the malady, and every where it was expected. Every one was agitated with hope and fear. The Jewish quarter, which is always unfortunately the locality where diseases spawn, was invaded, and on the day following, the 14th July, became a scene of frightful mortality.

The city of Smyrna is situated, in reality, at the mouth of a beautiful and spacious gulf. The city is built in part on the slopes of Mount Pagus, to the North-east, descending gently toward the shore. Within a few years it has overrun the plain

to the sea, considerable portions of which it is daily filling up for the purpose of constructing habitations which thus rest on an insecure foundation.

The heights of the city are inhabited by Turks, the middle portion is between the foot of Mount Pagus, and the plain to the level of this and the sea, is occupied by the Jews. The remaining outlines surrounding these divisions, are inhabited indiscriminately by Greeks, Armenians, and Europeans.

The portion of the town bordering upon the sea must have been raised in order to divert the dampness from it as much as possible; the humidity of those interior quarters are consequently so low as to render it almost impossible to drain the soil by ditching.

The inconvenience, very great, considered with regard to the public health, which results in the accumulation of stagnant water, is rendered still more so by a system of streets filthy and narrow, and in many places harboring the germs of disease in the refuse deposit. The streets which are broad and properly laid out, form a very small exception to the general rule.

Houses that have been destroyed by fire, and not rebuilt, which are common in Smyrna, are the receptacles of all kinds of uncleanness, such as the dead bodies of animals, etc., without speaking of the cemeteries around the churches and in the centre of the populous districts. Confined to this part of the city, that is most rarely visited by pure air, and presenting to greater extent than the others, all the unfavorable conditions we have enumerated, the Jewish quarter offered to the epidemic a prey, such as was to be expected from the lymphatic temperament and enfeebled constitution of this race, their mode of eating, and the life they lead; together with that element of fear inherent in their character, and which renders the people more accessible to infectious diseases. One-third of the deaths from Cholera were among the Jews.

At first the Cholera was confined to these quarters, but on July 17th it enveloped these limits, and spread itself over those of the point on the north of the extremity of the city, where the ground is low and constantly visited by marsh fevers from the North-west.

We take the liberty here to digress somewhat in order to note a fact which bears some relation to our narrative.

I was called on the 17th to visit this same locality at ten

o'clock in the evening. A storm from the North-north-east was prevailing. Three members of one family were taken with violent vomiting, diarrhœa and cramps, presenting by the *tout ensemble* of symptoms, a true picture of Cholera in the cold stage. We found ourselves in the presence of an excited crowd of people who *dared* not enter the garret room, and beheld three patients, two were prostrated on the floor — a man, a woman and boy. All three were cured in a few days.

We were told that the day before, in the evening of the 16th, some sheep and fowls had fallen dead as if struck by lightning, and were lying dead in the garden adjoining the dwelling of these patients.

Two doors from the house a young Englishman who had been passing the evening in social company, was taken with Cholera, upon his arrival at home, and died in four days from the time I first saw him. At this time the epidemic was spreading itself over all the city. The Turkish quarters being airy and refreshed with the breezes from the West and North-west, are not visited until the 20th of July.

In the meantime the fright was universal; the desire to escape the city general. Emigration had taken half the population into the surrounding villages — to European cities, and to the Islands — the shops were closed, the bazars deserted, and the whole city still as midnight, while commerce was completely suspended. It was a picture of desolation. We will simply say that these were the results of deplorable weakness; unpardonable desertions.

Under these grave circumstances, Rachid Pacha, our Governor, managed the affairs of the city with admirable fidelity and zeal.

Although destitute of those numerous patrolmen employed in the cities of Europe, to preserve order, there has been no disturbance in the city during the past two months. We have not even been obliged to complain of thefts.

We have never known a Turkish town which, in these respects, corresponds to the description we have given of Smyrna. It is not necessary to say that as regards the public health, there was much, nay, every thing to be done, especially of a hygienic character, among the great central portion of the population, and such reforms can not be established, even by the greatest exertions, in twenty-four hours, not even in several weeks.

Public charity has not been defective. All have contributed

their share. The hospitals have received their maximum of Cholera patients. Places for the distribution of bread and soup were appointed, and in many instances carried to the homes of the needy.

But with regard to public hygiene, what was accomplished? Were the gratuitous services of physicians and pharmacies proffered to the sick? Was attention given to the disinfection of houses? What organizations were there? Was even the sale of watermelons, in the height of the epidemic, prohibited?

We can not but remark that the care of the local authorities, who erected tents upon the side of the hill of Mount Pagus, above the city, to which certain infected Jewish families were sent, resulted in sensibly diminishing the plague, which was decimating this unhappy people.

In a few words we shall sketch the progress of the principal traits which characterized this epidemic.

From the 11th July, when the Cholera had really commenced its ravages, to the 25th, the sum total of deaths offered no variation, the average number being 30 deaths per day. There seems to have been an intermission of three days, from the 26th to the 29th, when all of a sudden the number increased rapidly and culminated on the 29th, 30th, 31st, and 1st August, reaching to 300 deaths in these four days. After which the number decreased to 30 per day, up to the 15th August, when it began steadily to diminish. Unfortunately we are not able to state accurately the whole number of deaths which occurred during the epidemic.

But although official lists are not exact, and necessarily afford room for alteration, we boldly place the mortality at 2,200, and this falls somewhat short of the truth, for the information we have received from excellent authorities would warrant us in stating still higher figures. These deaths distribute themselves in the following manner:

Jews	800
Greeks	700
Turks	520
Catholics	100
Armenian	60
Protestant	20
Total	2,200

The population of this city is generally supposed to be about 100,000 including the suburbs, which gives a proportion of 22 deaths to one thousand inhabitants. We do not, however, reach the same result when we examine the details of these statistics.

With the exception of the Jews, whose unfavorable hygienic condition we have already referred to, the people of the country, naturally sober, their manners and customs quiet and orderly, make their diet exclusively of vegetables and fruits. Animal food is scarcely ever used, owing in part to their rigid observance of Lent days, and other religious practices. Hence we have three classes of inhabitants whose manner of living respectively influences the number of individuals of each creed.

The Jews, as we have said, form the first group. Their death rate is enormous, averaging 70 per 1000 inhabitants, being a mortality of 800 in a population of 11,000.

The second class consists of Armenians, Catholics and Greeks. The proportion of deaths among these is respectively 25 — or 18 to 20 per 1000. Sixty, 100 and 700 deaths in a population of 2,400; 5,000 and 40,000, now residents of Smyrna.

The third class comprises the Turks and Protestants, whose rate of mortality is 12 and 10 per 1,000, being 520 and 20 out of 40,000 and 2,000 individuals remaining in the city.

Here, we may remark, we can prove that death ensues comparatively oftener in the cases of those individuals who, from their habits of life, fear it most and *vice versa.*

As to the villages in the neighborhood of Smyrna (with the exception of such places as Coukloudja and Seidikeui, whose altitude is 350 feet above the level of the sea for the first named place, and 450 for the second), it is, perhaps, explained in part why the epidemic but slightly affected these places, and also how it has so cruelly decimated all the others, such as Bournabat, Narlikeui, Bounarbashi, Hadgilar, Cordelio, Guesz-Tépé, and even Boudja.

Bournabat, especially, being the largest village situated at the mouth of, and at a little distance from the bay, towards the North-east, and only five English miles from Smyrna, offers this peculiarity, that the plague was most tenacious and comparatively intense.

We find from a list, which, without warranting its exactness, we believe approaches the truth, without over estimating, that in an exceptional population of 16,000 souls, there were 110 attacks

and 72 deaths, being a mortality of 4½ per 1,000 inhabitants, and 65 deaths out of 100 persons who were subjects of the disease. At Boudja, a place of 7,000 inhabitants, there were 30 attacked and 20 deaths, being a mortality of 70 deaths in 100 cases.

Here we subjoin a statement of the number of patients received into the hospitals of the city, with the rate of mortality and the number of persons cured.

	Admitted.	*Discharged.*	*Deaths.*
(1) Greek Hospital.....	205	70	135 — 66 per ct.
(2) Turkish Civil Hospital...	146	58	87 — 60 per ct.
(3) Saint Roch.....	23	7	16 — 67 per ct.
(4) Saint Antoine.....	54	31	23 — 43 per ct.
(5) French Marine.....	30	21	9 — 30 per ct.
(6) Turkish Military.....	70	50	20 — 23 per ct.
(7) Lazaret de St. Roch.....	18	39	12 — 30 per ct.
(8) Turkish Vessel.....	56	39	17 — 30 per ct.

We can not give the exact number of cases, and their results as they occurred in private practice, but from the admissions of the physicians themselves, it can not differ greatly from the preceding ratio.

Whatever may be our object, as we have before said, in publishing these tables, it is not to criticise merely. We only state facts.

We are pleased to bear testimony to the zeal and devotion, and efforts of the physicians in the hospitals of the city, and in private practice, whose skill and success merit the highest encomiums.

The sad mortality occurring in their practice is not to be imputed to them personally. Their honor is safe, but their system of therapeutics is bad, or in the language of Senator M. Bonjean, who used the following sarcasm in a memorable discussion before the Senate on the 3d July, 1865: "The chaos of their therapeutics is alone culpable." We repeat what was said before the Academy of Medicine, by the distinguished Dr. Malgaigne, professor in the faculty of Medicine in Paris. "Complete absence of scientific doctrine, complete absence of principles in the application of the art of healing, empiricism throughout — this is the condition of medicine."

As to the part which homœopathy played under these trying circumstances, we ought first, in setting ourselves entirely aside,

to acknowledge, with the frankness which we are accustomed to use in all our dealings, that the public extended to our work of the 5th of July, "Apropos du Cholera," a more kindly welcome than we had anticipated.

The demand for our prophylactics, *Veratrum* and *Cuprum*, which we had recommended, was incessant, and growing, more than would have been credited. We have distributed in the neighborhood to about 600 heads of families, which would make the number of those who used them about 3,000, taking a very modest estimate of the average number of persons in a family. We owe it to ourselves to mention that notwithstanding these families consisted of all grades and condition in society, not one of their families, to our knowledge, was attacked by the epidemic whilst taking our prophylactics.

There were some derangements of the stomach and some slight attacks of cholerine among these persons, which were readily cured by a few doses of *Veratrum* in solution, in doses often repeated, according to the violence of the attack.

These magnificent results universally obtained, appear to us worthy of note, and only serve to confirm identical results established by homœopathy in all countries, and in all former invasions of the epidemic.

There are, besides these, significant facts of which we have been witnesses, and which corroborate what we have said touching the efficacy of the prophylactics recommended by homœopathy. We will only cite the following cases:

1st. Out of four families related to each other, three were prejudiced against taking the preventatives with which we had provided them. The fourth family, A. C., laughed at homœopathy, and would not employ it. Having gone into the country to the family S., it lost first a child of seven years, shortly after the father and mother themselves were attacked with the disease, and died in a few hours, notwithstanding all the resources of medical aid were supplied. The family S., and the others took care of their sick relatives without receiving the slightest harm.

2nd. Another family J., inhabited a koula in the valley of St. Anne. They let a portion of it to the family S., of Smyrna, four members of which died of the epidemic, as well as a nurse of Monsieur S. The rest of the family were not attacked, although they were in constant communication with the family S., and assisted in taking care of the sick nurse in attendance

upon the deceased. Observe, that with the exception of the nurse who was attacked with the disease, all the members of the family J. took the prophylactics.

The fact that in general the cases were not isolated, and that in a house visited by the scourge there were generally more than one attacked, goes still farther to confirm the efficaciousness of the prophylactics.

3rd. M. P., of Bournabat, was the only one in his family who took our prophylactics. Several members of it were suddenly attacked and one died. M. P. had all the care of all the patients and was not subject to the disease. He is still alive and well.

4th. Another family, P., of Smyrna, used regularly our preservatives. A servant who had come to them in the morning was violently attacked with symptoms of cholera. We remained all night with her, as did the proprietors of the house. She recovered.

None of the other members of the family were attacked.

5th. The families of G. and C., of Séidikeui, composed of thirty-three persons, had been subject to our prophylactics and retained their usual health through all of the epidemic, notwithstanding the fact that eight cases had occurred in the neighboring house, and despite two attacks, where preservatives had not been employed, of which one proved fatal, among their own gardeners, who lodged in the same yard, and of whom they took the best of care.

6th. When the epidemic appeared in the midst of the Jews, they were much alarmed, and most of them fled from the infection. We chanced to meet with twenty families who were attacked with the disease, and forming a group of a hundred individuals availed themselves of the hospitality of the vast establishment of the Bain de Diane (Khalcabounar), kept by M. Brufel. This brave Italian patriot did more than to receive them without demanding pay.

We provided him with the prophylactics, accompanied with our prescriptions, which he dispensed with a scrupulous solicitude, and obtained successful results worthy of note — showing that not one of the number who had fled for a refuge to his mansion fell a victim to this cruel malady, while numbers of their co-religionists from the same quarter, carried the germs of the disease along with them, and died of the disease.

In the most formidable of the attacks we have counseled the

use of *Sulphur* in the shoes, and have found that in many cases, laboring men especially, it has maintained them in perfect health.

The number of patients we treated for this disease during the recent epidemic was 248.

These may be divided, as regards the nature of the disease, into two groups. One hundred and fifty-two cases presented marked symptoms of Cholerine more or less violent, the greatest number of whom were treated with *Phos. acid* alternated with *Ipecac.* The most obstinate cases we followed up successfully with *Sulphur.* Oftentimes we obtained good results from *Colycynth*, also from *Chamomilla* and *Arsenic*, from this last especially when the symptoms indicated that the disease was brought on by eating fruits or drinking ice water. Coldness of the stomach was the symptom manifest.

The following table gives an exact statement of the number and nationalities of our patients who presented incontestable symptoms of Cholera.

		Females.	*Males.*	*Children.*
Mussulmen	58	10	39	9
Greeks	23	11	9	3
Jews	7	2	2	3
Catholics	4	0	3	1
Armenians	3	2	1	0
Protestants	1	0	1	0
	96	25	55	16

In these ninety-six cases we have to lament the death of eight, being eight per cent.

We shall now dwell somewhat upon the details, and indicate briefly the most important circumstances of their sickness and death.

1st. A young Turkish girl, whose brother and mother had died a few days before, was the last in her family to be attacked. She, however, recovered after six days, when, having left her bed, she ate some watermelon. Shortly after she was taken sick with cramps and other symptoms of Cholera. She resorted to a remedy advised by an old woman, which consisted of a plaster of raw garlic applied to the abdomen and the *arms ! ! !* She died.

2nd. An aged Turk. Was taken sick in the night; we arrived

at eleven o'clock in the morning, and found him lying on the bare floor in a Mansard story of the Grand Taverns, he was no longer a patient, but almost a cadaver. To free our conscience we gave him *Veratrum* and *Cuprum*, but without effect. When we returned to see him at a quarter of five in the afternoon he was already dead.

3rd. An elderly Armenian, M. M., who had suffered many years from Asthma, was attacked with Cholera. Ten days after, when all symptoms of this disease had disappeared, leaving him in a very weak state, an attack of Asthma set in; he died in a few hours.

4th. A Grecian woman, *æt.* forty, in Séidikeui. We chanced to be called to see her when she was expected every moment to breathe her last. Her symptoms suggested *Carbo veg.* We gave it, and obtained the desired effects. She was almost restored to health, but being badly lodged, she was carried under a burning sun to a house some distance from the village, where she died of Typhus in ten or twelve days after her removal, under the hands of allopathic physicians.

5th. A young Greek, in a house near the Garden of Smyrna, where there had been a death from Cholera, was attacked with the disease. We visited him on our way to the depot. Prescribed *Veratrum* and *Cuprum.* Upon our return in the evening of the same day, he was already interred.

6th. A young Greek, *æt.* 12, whose sister died of Cholera two days before, was violently attacked with the same disease. We attended him twelve days, and he recovered. Shortly after, he was again seized with diarrhœa through imprudence in his diet. He took a potion prescribed by the Sisters of Charity who happened to see him, and soon died.

7th. An aged Jewess, who lived in the higher portion of the Israelite quarters, died the next day after our first visit, when we had declared her to be past recovery.

8th. M. R. lived in a house isolated from all others, situated in the midst of a marsh or low garden beyond the Point, near by a tan yard, where the fœtid emanations he was compelled to inhale had brought on a diarrhœa some four days since. He had taken also a cold bath and slept in a room under an open window. The Cholera manifested itself in his system. We were called to visit him. The unfavorable circumstances he was placed in, together with his own imprudence, rendered a

prognosis unfavorable. He died in four days after our first visit, presenting all the symptoms of Asphyxia, calm, tranquil, believing himself doing well.

Side by side with this sad table of mortality, which we think can not justly be laid to our charge, still less to the charge of homœopathy, we put a portion of the 88 cases treated by us, as taken from memoranda of practice to show what we have saved.

1st. A Turkish porter, formerly employed at the Bank, now watchman on the bridge leading to Bournabat, was attacked one afternoon. We did not see him until seven hours afterwards. His symptoms were as follows:

Hollow eyes — pulse hardly perceptible — speech inarticulate — cramps — respiration hurried — extremities cold — urine suppressed — diarrhœa and vomiting, with rice-water discharges.

℞ *Veratrum* and *Cuprum* — alternately, every fifteen minutes. We learned the next day that he had been carried into a café of the Grand Tavern where we found him in a more dangerous condition than on the preceding day. The vomiting and diarrhœa having ceased, there was a general deathlike coldness over the whole body — tongue cold — hands and feet shrivelled and rigid — cyanose — pulse very feeble — voice scarcely audible — great anxiety of expression in the features; the patient was unconscious. ℞ *Ars.* and *Carb. veg.*, alternately every ten minutes. Towards evening he vomited black viscid water: the urine became more normal. In a few hours there was more warmth of body. On the third day morning he complained of a burning pain at the epigastrium and intense thirst. ℞ *Ars.* 3rd. Ordered him to have cold water in small quantities to quench his thirst. Later in the evening our patient was relieved, and the day following he was convalescent, a triumph to Homœopathy. In eight days he returned to his duties at the Bank.

2nd. While treating this patient we were also giving our attention to twenty others of his companions in the same quarter of the Grand Tavern, and three of them in the same café, and without repeating here the symptoms, which were with a few exceptions of a similar character and intensity, we will only say that we did not lose one (excepting the old Turk mentioned in case No. II.) whose circumstances rendered it impossible to save him.

The medicines we prescribed successfully were, *Veratrum*, *Cuprum*, *Ars.*, *Carb. veg.*, *Hydrocyanic acid* and *Sulphur.* Convalescence generally took place within seven or eight days.

3rd. A Turkish nurse was attacked on the night of July 19th, with the following symptoms: General coldness — skin cold and shriveled, without elasticity — eyes sunken — cramps — respiration labored — diarrhœa and vomiting incessant — pulse small and quick — urine absent — tongue cold — intense thirst — sleeplessness. ℞ *Veratrum*, *Cuprum.* In a few hours the evacuations and borborygmus ceased. The next day, a dry, hot febrile condition set in, with an accelerated pulse of 130. ℞ *Aconite*, which produced copious perspiration. On the following day she was well.

4th. Four days after, in the same house, a governess was seized with the following symptoms:

Hands and face of a blush cast — eyes sunken — marked coldness of the whole body — pulse scarcely perceptible — urine suppressed for several hours — cramps — diarrhœa and vomiting for five or six hours — respiration hurried — great jactation of the muscles. ℞ *Veratrum et Cuprum* every quarter of an hour alternately. In the morning the discharges from the bowels and vomiting were arrested; the circulation was much improved — pulse almost normal — thirst and restlessness. ℞ *Arsenic.* Shortly after the urine returned, and on the following day the patient was convalescent.

5th. Called on the same evening at the same place, to see the mistress of the house, who had colic, accompanied with a slight diarrhœa and vomiting. We gave *Ipecac* alternately with *Phosph. acid*, but did not obtain any effect. In the interval of visits we spoke encouragingly to her, and promised a speedy recovery — advised her to eat freely of a kind of red fruit produced by the cornier or soubier tree, which has a very harsh acid taste, and is here called "crania." The people consider it a powerful astringent. The result was marvelous. The evacuation and vomiting, together with the violent cramps in the epigastrium were so frequent that it was only with great difficulty that we caused her to swallow some spoonsfull of medicine which her stomach soon proved itself unable to retain. Exhausted, she fell into sleep, the very picture of death, cold and rigid. Her friends gave up hope and made preparations for her interment, amid general grief.

We did not wish to give up the case for lost. We made her swallow, not without difficulty, a dose of *Carbo veg.*, and under the influence of that remedy alone, she was not only brought back to life, but in a few days, thanks to a nutritious diet, recovered her health entirely.

6th. Four other individuals were attacked in a similar manner, with symptoms more or less violent, which made seven cases, without mentioning three cases of Cholerine in the same house. These multiplied attacks have been remarked in almost all the dwellings infected by the disease, and here there was this particular observation that twenty-eight mattresses were soiled by the evacuations of the mistress of the house.

Furthermore, we may be allowed to add that a Turk was seized with Cholera in the same house, and died, having refused medicine and medical assistance.

7th. Opposite to this dwelling another sad case occurred in a Turkish lady of rank, who did not resort to our treatment until the cold period had commenced. We administered *Veratrum*, *Cuprum*, *Arsenic* and *Sulphur*, and in a few days she improved. The wife of a custom house employee, living in the neighborhood, being attacked with Cholera, and having already passed into a typhoid state, through the use of laudanum, which had only checked the evacuations by sending the disease to the brain — recovered in ten days under the use of *Rhus*, *Bryonia*, *Arsenic* and *Belladonna*.

8. Visiting, the next day, this same Turkish quarter, we were approached by a man whose countenance was expressive of despair; he conducted us through a labyrinth of streets to his lodgings in the upper part of the town. Upon the ground in the open air, lay his sick child, four or five years of age, who had been violently attacked with the disease after eating of water-melon. She had the following distressing symptoms:

Icy coldness of body, with shriveled skin — cyanose — eyes sunken — diarrhœa and vomiting very frequent, with rice-water discharges — oppressed breathing. She was lying upon the floor exposed to a considerable draught of air. We prescribed *Veratrum* and *Cuprum*, to be taken every ten minutes. As it was impossible to see the patient again, we left our remedies and directions with the father. In a few days he called upon us to bestow his blessing for the cure of the child with the medicines above named.

9th. A Frenchman, a white-washer by occupation, who lived in the Armenian quarter, called upon us on Wednesday to go and see his little daughter, aged six years, presenting the alarming symptoms of Cholera, similar in the order of development to those of the preceding case. We prescribed *Veratrum* and *Cuprum*, to be given alternately every quarter of an hour.

The following day the circulation became normal — the evacuations ceased — the urine was natural and the pulse regular. Rice-water was directed to be given as a drink. On the Sunday, the younger sister was attacked in a similar manner, and was visited by the Sisters of Mercy (we were obliged to be absent attending to cases in the country), who gave a potion of laudanum. As soon as we returned we visited our patient and found her convalescent, while the other one attended to by the Sisters was already dead.

10th. On the 9th of July, towards midnight, a young man living in the district of St. John, came in great haste to have us go and see his wife, who was prostrated with the following symptoms:

Marked coldness of the extremities — pulse thready and frequent — eyes cavernous — cramps since the afternoon — stools frequent and watery — great anxiety — thirst — vomiting incessant — urine suppressed since morning. ℞ *Veratum* and *Cuprum*, alternately. She began to grow better in thirty hours from the time we first saw her, and in a few days resumed her duties.

11th. At 11 P.M. a carpenter, V. G., who lived near the large house of M. Constant, had a child of four years old who was stricken down with Cholera. The following symptoms were present:

Coldness of the whole body — pulse scarcely perceptible — skin bluish — face cadaverous — skin of the hands shrunken — constant evacuations from the bowels, and ejections from the mouth of a rice-water character. ℞ *Veratrum* alternate with *Arsenic*. The circulation returned before the day was out; the evacuations ceased; the urine was normal. ℞ *Aconite*. An abundant perspiration ensued. Four days after the child was playing in the yard of the house.

Another remarkable case occurred in the family. The father, hale and hearty, had remained one evening in front of the door of his house until just before the hour of midnight. On retiring

to his bedroom he was taken with general *malaise*, followed by cramps in the stomach, numbness of the fingers and extremities, extending to the loins and up the back — cold. His voice was very feeble — his face pale and expression wild. We called, immediately prescribed two drops of the *Spirits of Camphor*, upon sugar, to be put into water — a teaspoonful every five minutes. After the fifth and sixth dose a re-action was manifest. The color returned to his cheek — respiration was normal, and followed by a general perspiration, which continued for two days. He was up on the third day, but felt as though he had passed through a long sickness. Convalescence was gradually established.

12th. At Bournabat, a woman, *æt.* 45, wife of a gardener of M. C., having lost, two days before, her son with Cholera, and her only sister lying dead of the same malady on another bed the day we called. Symptoms: Eyes sunken — pulse frequent and small — ringing in the ears — intense thirst — respiration hurried — pain in the epigastrium — diarrhœa watery — vomiting — urine suppressed since the night before — great agitation and fear of death. ℞ *Veratrum* and *Cuprum*, to be taken in alternation. The next day as we were on our way to visit her, we heard she was dead; notwithstanding we went to see her, and found her apparently comatose, with the following symptoms:

Diarrhœa and vomiting had ceased — the face and extremities were of a purple hue — skin shrivelled — eyes cavernous —pulse almost extinct — voice ditto. The case was a desperate one. We prescribed *Acid. hydrocyanic*, 30th. Eight globules in half glass of water. Teaspoonful to be taken every fifteen minutes. When we returned in the evening we observed that the circulation had revived — the pulse improved. The vomiting and diarrhœa had returned. We prescribed *Veratrum* 5th, which produced a striking change for the better. Continued the same medicine. To check the formidable re-action, we left *Aconite*. For the green stools and burning at the rectum, we directed *Arsenic* to be given. Convalescence ensued on the following day. In ten days after she enjoyed perfect health.

We arrived at Séidikeui in time to save four individuals who were attacked with the epidemic. In this village four deaths had already taken place from the effects of the scourge. In one case, that of a woman, we found that she was cold and rigid — her neighbors had concluded she must die — but no sooner had

she been under the influence of *Carbo veg.* than she began to show signs of life, and in ten days from this time she was perfectly well. The case resembled that of No. 4 of our mortuary table.

It would be superfluous to continue our enumeration of patients that we have succeeded in saving by our treatment, as it would oblige us to repeat the same things. We think, moreover, that sufficient has been said to prove the success of homœopathic treatment in Cholera. We will only ask if the physicians live who would have believed themselves to be doing right in abandoning to the "expectant" method the patients of whom we have spoken. To ask the question is to answer it. If, then, these patients have been cured, and that they have been can not be disputed, the honor of the cure belongs to Homœopathy, and to it alone.

It is well to observe that aside from the rare cases which we have been called to treat in the incipient stage of invasion (and for which we have always successfully prescribed the "*Spirits of Camphor*" of Hahnemann, which we have never found to fail us), we have used medicine in dilution and globules, from the 3d to the 30th potency. More generally the 12th. The prophylactics which we distributed were also the 12th.

We have never counseled frictions, which we believe to be hurtful rather than otherwise; nor have we had recourse to bathing or sinapisms.

Our medicines were procured from the homœopathic pharmacy of MM. Catellan and Bros. of Paris, whose probity, skill, and talent have procured for them an unquestionable fame.

In resuming the statement which precedes, and which, although succinct, presents a picture of vast proportion, fruitful in general observations, we may be permitted to record now some reflections which appear to us to be of importance.

The nature of our practice not only comports with it, but demands it. Science will be benefited thereby.

It is beyond *doubt* that the epidemic was spread by parties coming from the infected places. Was its rapid propagation afterwards owing to simple contact with infected clothing — to the absorption of Cholera matter, which impregnated the water? or to a combining the two cases and rapidly propagating the poisons? These questions decided may point out the phenomena of the disease, but they do not answer to our inquiry by stating the exact formula of the poison.

Another fact which has impressed itself upon every one, is that it is very rare we find a solitary case in a family in the same neighborhood where it prevails. It is generally in groups in the quarters infected. For no sooner was a case proved to exist in a neighborhood than several attacks followed. May this not be owing to the effluvia that arises from excretory matters conveyed from the patient?

There are many strong reasons for believing this from the fact —that where the vessels, the linen, and apartments of patients have been cleansed and disinfected, the best results have been obtained. Cases resulting from direct contact with a patient did not come under observation.

During the epidemic it has been observed that there is a marked diminution of animal life, such as winged insects and birds. The swallow, the sparrow, flies, mosquitoes, wasps and butterflies have disappeared, and their return has marked the cessation of the epidemic.

It is said, though we are not competent to comfirm the truth of the report, that on the coast of Nimfio a great plain was strewed with the dead bodies of swallows.

From the 24th June to this day, it has only rained twice, on the 25th June and the 7th July, and upon those two days no deaths occurred.

The prevailing winds during the epidemic were from the South-west. The skies were always clear.

The barometer, as we find from the meteorological observations of M. Peuser, chief engineer of the railway from Arden, who has been so kind as to place at our disposal the following recorded facts, has from the invasion of the Cholera indicated a depression, which was maintained until the epidemic abated; ascending and descending according to the increase or decrease of the mortality. It was just the opposite with the thermometer.

The greatest number of cases occurred in the night, and it has been observed that many persons were attacked as the result of exposure to currents of air, to the dews of evening, or, of having eaten fruits, especially watermelons.

Very few cases occurred which were not brought on by some such cause. The mind, as is always the case, played an important part.

The tobacco merchants suffered exceedingly from the epidemic. Is not this an indication which science should note?

The use of immoderate doses of laudanum, which some of our physicians have employed in this disease, has resulted unfavorably for the patients, who, if they did not die of the Cholera, were carried away by typhus fever. Only one case of typhus occurred among the Cholera patients who were treated homœopathically.

The greater the conglomeration in a populous centre, the greater, naturally, the intensity of the disease. This observation is true of all epidemics, but more particularly of Cholera. It is undeniable that the immense emigration from these parts, which has reduced the population of Smyrna to one-half of its original number, has contributed largely to render the presence of the plague among us less fatal. One can not blame, in view of the results obtained, this disposition of the people to fly the infected places. This dispersion, occurring at such a time, would constitute, perhaps, a very powerful means to stay the ravages of the disease.

The anxiety of all the people during this melancholy period, rendered even the imprudent prudent, and caused many of the reckless to observe strictly a regular and simple regime. It is universally acknowledged that this prudent course contributed in a great measure to lessen the number of attacks.

Finally, in observing, without bias, in order to draw from them a happy omen, the brilliant results of the prophylactics (*Veratrum* and *Cuprum*) which are counseled by Homœopathy, which we have employed with so great success every where, the time may be foreseen when divested of prejudice, deriving their convictions from the logic of facts, the masses will hasten generally to adopt the preventive method. Then shall we be able to behold this epidemic of Cholera, of which the name alone produces terror, with the composure equal to that with which we regard the treatment of small pox, that frightened our fathers scarcely a century ago, as the plague now frightens us; and which, if victoriously contended with to-day, the honor is due to the celebrated Jenner, that precursor of the immortal Hahnemann, who, guided by the eternal and beneficial law of similars, found in vaccine the specific par excellence.

Our conclusions are brief, and based upon the following facts:

Always and every where Allopathic treatment is supremely

impotent in the presence of Cholera. The average rate of mortality which has occurred constantly in this epidemic, in our city, under its treatment, corresponds with the figures of all its known statistics, that is to say, it loses from 60 to 70 per cent.

Per contra — Homœopathy has preserved thousands of individuals in this region from the ravages of Cholera, who were in the most unfavorable condition. The number of deaths under our treatment has been quite insignificant, averaging only 7 to 8 per cent., being without the rate of mortality arising from ordinary diseases.

To our opponents, in good faith, we offer the perusal of the notes regularly made in our journal, of the cases which we treated. We are ready to accompany them to the places in which we attended and cured our patients, to allow them to make all the inquiries which they may desire to make in order to convince themselves of the truths of the facts stated.

To our detractors we reply in the language of a distinguished publicist. "It is the nature of men to oppose discoveries; the pre-occupation of mind by selfish interests, the pride arising from wounded self-love, established habits of thought and preconceived ideas, have such power that the introduction of even the most useful innovation, without exciting violent opposition, is an unexampled occurrence."

Personally, as we have already said, the knowledge that we have snatched but one victim from the Cholera, would well reward us for the weariness incident to our professional duties. We have felt that we have done our duty, and our ambition is fully satisfied, our conscience honored, by the successful discharge of our obligations as a physician.

Smyrna, *September* 28, 1865.